

ADVENTURE ISLAND

the ultimate in family fun!

PERSONAL INFORMATION

| | | | | | |
|-------------------|---------------------------|--------|------------------------------|-----------------------------|-----------|
| | | | | DATE | |
| NAME | | | | SOCIAL SECURITY NUMBER | |
| LAST | FIRST | MIDDLE | | | |
| PRESENT ADDRESS | | | STREET | CITY | STATE ZIP |
| PERMANENT ADDRESS | | | STREET | CITY | STATE ZIP |
| PHONE NO. | ARE YOU 18 YEARS OR OLDER | | Yes <input type="checkbox"/> | No <input type="checkbox"/> | |

LAST
FIRST
MIDDLE

SPECIAL QUESTIONS

DO NOT ANSWER **ANY** OF THE QUESTIONS IN THIS FRAMED AREA UNLESS THE EMPLOYER HAS **CHECKED A BOX PRECEDING** A QUESTION, THEREBY INDICATING THAT THE INFORMATION IS REQUIRED FOR A BONA FIDE OCCUPATIONAL QUALIFICATION, OR DICTATED BY NATIONAL SECURITY LAWS, OR IS NEEDED FOR OTHER LEGALLY PERMISSIBLE REASONS.

- Height: _____ feet: _____ inches
- Are you prevented from lawfully becoming employed in the U.S.? Yes ___ No ___
- Weight: _____ lbs.
- Date of Birth* _____
- What Foreign Languages do you speak fluently? _____ Read _____ Write _____
- Have you been convicted of a felony or misdemeanor within the last 5 years? ** Yes _____ No _____ Describe: _____

*The Age Discrimination in Employment Act of 1967 prohibits discrimination on the basis of age with respect to individuals who are at least 40 but less than 70 years of age.
 **You will not be denied employment solely because of a conviction record, unless the offense is related to the job for which you have applied.

EMPLOYMENT DESIRED

| | | |
|--------------------------------------|--|----------------|
| POSITION | DATE YOU CAN START | SALARY DESIRED |
| ARE YOU EMPLOYED NOW? | IF SO MAY WE INQUIRE OF YOUR PRESENT EMPLOYER? | |
| EVER APPLIED TO THIS COMPANY BEFORE? | WHERE? | WHEN? |

| EDUCATION | NAME AND LOCATION OF SCHOOL | *NO. OF YEARS ATTENDED | *DID YOU GRADUATE? | SUBJECTS STUDIED |
|--|-----------------------------|------------------------|--------------------|------------------|
| GRAMMAR SCHOOL | | | | |
| HIGH SCHOOL | | | | |
| COLLEGE | | | | |
| TRADE, BUSINESS OR CORRESPONDENCE SCHOOL | | | | |

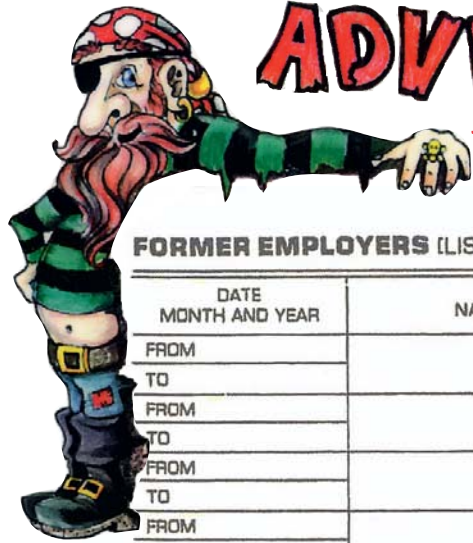
*The Age Discrimination in Employment Act of 1967 prohibits discrimination on the basis of age with respect to individuals who are at least 40 but less than 70 years of age.

GENERAL

SUBJECTS OF SPECIAL STUDY OR RESEARCH WORK

| | | |
|--------------------------------|------|--|
| U.S. MILITARY OR NAVAL SERVICE | RANK | PRESENT MEMBERSHIP IN NATIONAL GUARD OR RESERVES |
|--------------------------------|------|--|

(CONTINUED ON OTHER SIDE)



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FORMER EMPLOYERS (LIST BELOW LAST FOUR EMPLOYERS, STARTING WITH LAST ONE FIRST).

| DATE MONTH AND YEAR | NAME AND ADDRESS OF EMPLOYER | SALARY | POSITION | REASON FOR LEAVING |
|------------------------|------------------------------|--------|----------|--------------------|
| FROM | | | | |
| TO | | | | |
| FROM | | | | |
| TO | | | | |
| FROM | | | | |
| TO | | | | |
| FROM | | | | |
| TO | | | | |

REFERENCES: GIVE THE NAMES OF THREE PERSONS NOT RELATED TO YOU, WHOM YOU HAVE KNOWN AT LEAST ONE YEAR.

| | NAME | ADDRESS | BUSINESS | YEARS ACQUAINTED |
|---|------|---------|----------|---------------------|
| 1 | | | | |
| 2 | | | | |
| 3 | | | | |

PHYSICAL RECORD:

DO YOU HAVE ANY PHYSICAL LIMITATIONS THAT PRECLUDE YOU FROM PERFORMING ANY WORK FOR WHICH YOU ARE BEING CONSIDERED? Yes No
 IF YES, WHAT CAN BE DONE TO ACCOMMODATE YOUR LIMITATION? _____

PLEASE DESCRIBE: _____

**IN CASE OF
EMERGENCY NOTIFY**

NAME

ADDRESS

PHONE NO

"I CERTIFY THAT THE FACTS CONTAINED IN THIS APPLICATION ARE TRUE AND COMPLETE TO THE BEST OF MY KNOWLEDGE AND UNDERSTAND THAT, IF EMPLOYED, FALSIFIED STATEMENTS ON THIS APPLICATION SHALL BE GROUNDS FOR DISMISSAL. I AUTHORIZE INVESTIGATION OF ALL STATEMENTS CONTAINED HEREIN AND THE REFERENCES LISTED ABOVE TO GIVE YOU ANY AND ALL INFORMATION CONCERNING MY PREVIOUS EMPLOYMENT AND ANY PERTINENT INFORMATION THEY MAY HAVE, PERSONAL OR OTHERWISE, AND RELEASE ALL PARTIES FROM ALL LIABILITY FOR ANY DAMAGE THAT MAY RESULT FROM FURNISHING SAME TO YOU.

I UNDERSTAND AND AGREE THAT, IF HIRED, MY EMPLOYMENT IS FOR NO DEFINITE PERIOD AND MAY, REGARDLESS OF THE DATE OF PAYMENT OF MY WAGES AND SALARY, BE TERMINATED AT ANY TIME WITHOUT ANY PRIOR NOTICE."

DATE

SIGNATURE

DO NOT WRITE BELOW THIS LINE

INTERVIEWED BY

DATE

HIRED: Yes No

POSITION

DEPT.

SALARY/WAGE

DATE REPORTING TO WORK

APPROVED: 1.

2.

3.

EMPLOYMENT MANAGER

DEPT HEAD

GENERAL MANAGER



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Please list any restrictions as to your availability for working. Please note that restrictions as to what shift and/or time frame you are able to work could reduce your chances of employment at Adventure Island. Exceptions to this rule are anyone who is in high school. During school session, Sunday through Thursday night, anyone enrolled in high school must be off by 10:00 p.m. We want to work with any of you on your schedules, but there are no guarantees.

Comments:

Signature: _____

Requirements for employment at Adventure Island:

1. Valid photo identification (driver's license, school ID, military ID, etc...) We will make a copy for our files.
2. Social security card. We will make a copy for our files.
3. You must be 15 years of age or older.
4. We do not employ people that use tobacco products of any kind.
5. References must be filled out entirely with all the correct names and numbers.

You may mail in the application to the address listed below or email to info@adventure-island.com.